

Subcommittee on Health and Human Services, and the Fiscal Research Division as follows:

- (1) By January 31, 2008, the Department shall make a detailed written interim report on:
 - a. The projected date for implementation of the new core MMIS+ system.
 - b. The status of the system development and implementation.
 - c. Any issues that may impact the development and implementation of the core system, along with the actions being taken to reduce the impact.
 - d. Any issues related to vendor performance and the actions being taken to ensure that the issues do not impact the timely completion of the project.
 - e. The status of the project as indicated by the Office of Information Technology Services Project Portfolio Manager tool with an explanation of actions being taken to address any unsatisfactory indicators and the date by which remediation will be accomplished.
 - f. Estimated final cost of the system, including an explanation of any additional costs not previously budgeted.
 - g. A list of system enhancements under development.
 - h. Projected date for implementation of each enhancement.
 - i. Current status of each system enhancement.
 - j. Any issues that may impact the development and implementation of the system enhancements, along with the actions being taken to reduce the impact.
 - k. Cost for each system enhancement.
 - l. Availability of federal funds to support development and implementation of each system enhancement.
 - m. Any potential system enhancements not currently being considered or implemented.
- (2) By May 1, 2008, the Department shall make a detailed final written report on the total costs and functionality of the MMIS+ system. A copy of the final report shall also be submitted to the Joint Legislative Commission on Governmental Operations.

PILOT PROGRAM/MEDICAID DUAL ELIGIBLE SPECIAL NEEDS PLAN

SECTION 10.40F.(a) The Department of Health and Human Services, Division of Medical Assistance, shall evaluate and establish a pilot program in at least two but not more than four regions of the State to offer nursing facility certifiable (NFC) dual eligible Medicaid recipients services through a Special Needs Plan (SNP). The SNP will work with the Department's Community Care Networks. The SNP must be currently licensed in the State, have expertise in managing NFC dually eligible Medicaid recipients, have expertise or a relationship with experts in geriatrics and be capable and willing to work directly with Community Care North Carolina (CCNC). The SNP must also have no citations or ongoing investigations from the State, the Centers for Medicaid and Medicare Services, or other regulatory agency.

SECTION 10.40F.(b) In establishing the pilot program, the Department shall select up to four regions (county clusters) based on the number of NFC dual